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## \*BIBDATASHEET\*

CONFIRMATION NO. 2702

Bib Data Sheet

SERIAL NUMBER 09/529,957	FILING DATE 04/21/2000  RULE	CLASS 382	GROUP ART UNIT 2623	ATTORNEY DOCKET NO. 44662-59506
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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *verified vb* \*\*\*\*\*

This application is a 371 of PCT/SE98/01914 10/22/1998

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *NONE vb* \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 05/31/2000

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR  COUNTRY SWEDEN	SHEETS  DRAWING 4	TOTAL  CLAIMS 21	INDEPENDENT  CLAIMS 2
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after allowance <i>vb</i>				
Verified and Acknowledged <i>vb</i>	Examiner's Signature	Initials		

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## TITLE

CONTACTLESS MEASURING OF POSITION AND ORIENTATION

FILING FEE  RECEIVED 988	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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